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(Econ	PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) Application Number 10/664638		Docket Number (Optional) EL0499USNA Filed September 18, 2003	
For HIGH	OLERANCE EMBEDDED CAPACITORS			
Art Unit 2	831	Examiner NG	UYEN T. HA	
	uest under the provisions of 37 CFR 1.13	6(a) to extend the peri	iod for filing a reply in t	he above Identified
application. The request	ted extension and fee are as follows (chec	k time period desired	and enter the appropri	ate fee below):
		<u>Fee</u>	Small Entity Fee	
	One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ 120.00
	Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$
	Three months (37 CFR 1.17(a)(3))	\$1020	\$510	S
	Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
Applica	ent claims small entity status. See 37 CFR	1.27.		
A che	ck in the amount of the fee is enclosed	l.		
Paym	ent by credit card. Form PTO-2038 is	attached.		
The D	rector has already been authorized to	charge fees in this	application to a Dep	osit Account.
I am the	NG: Information on this form may become public credit card information and authorization on P			
	assignee of record of the entire	re interest. See 37 (CFR 3.71.	
	assignee of record of the enti-	3.73(b) is enclosed ((Form PTQ/SB/98).	
	assignee of record of the enti- Statement under 37 CFR 3 attorney or agent of record. R	3.73(b) is enclosed (Registration Number	(Form PTQ/SB/98).	
	assignee of record of the enti-	3,73(b) is enclosed (Registration Number FR 1,34.	(Form PTQ/SB/98).	
	assignee of record of the enti- Statement under 37 CFR 3 attorney or agent of record. R	3,73(b) is enclosed (Registration Number FR 1,34.	Form PTO/SB/98). 	
	assignee of record of the enti- Statement under 37 CFR 3 attorney or agent of record. R	3,73(b) is enclosed (Registration Number FR 1,34.	Form PTO/SB/98). 	ly 12, 2005 Date
	assignee of record of the enti- Statement under 37 CFR 3 attorney or agent of record. R attorney or agent under 37 CI Registration number if acting under	3,73(b) is enclosed (Registration Number FR 1,34.	Form PTO/SB/98). 30,684 	
	assignee of record of the enti- Statement under 37 CFR 3 attorney or agent of record. R attorney or agent under 37 CI Registration number if acting under Research	3,73(b) is enclosed (Registration Number FR 1,34.	Form PTO/SB/98). 30,684 Ju	Date
NOTE: Signat	assignee of record of the enti- Statement under 37 CFR 3 attorney or agent of record. R attorney or agent under 37 CI Registration number if acting under Signature Barbara C. Siegell Typed or printed name	3.73(b) is enclosed (Registration Number FR 1.34.	Form PTO/SB/98). 30,684 Ju (30)	Date 2) 992-4931 phone Number
	assignee of record of the enti- Statement under 37 CFR 3 attorney or agent of record. R attorney or agent under 37 CI Registration number if acting under Signature Barbara C. Siegell Typed or printed name arcs of all the inventors or assignees of record of the equired, see below.	3.73(b) is enclosed (Registration Number FR 1.34. r 37 GFR 1.34	Form PTO/SB/98). 30,684 Ju (30)	Dale 2) 992-4931 phone Number
signature is re	assignee of record of the enti- Statement under 37 CFR 3 attorney or agent of record. Registration number if acting under Registration number if acting under Signature Barbara C. Siegell Typed or printed name ures of all the inventors or assignees of record of the quired, see below.	3.73(b) is enclosed (Registration Number FR 1.34. r 37 GFR 1.34 entire interest or their representation)	Form PTO/SB/98 . 30,684 Ju 	Date 2) 992-4931 phone Number mit multiple forms if more th
Total This collection USPTO to pro- complete, Incit comments on I	assignee of record of the enti- Statement under 37 CFR 3 attorney or agent of record. R attorney or agent under 37 CI Registration number if acting under Signature Barbara C. Siegell Typed or printed name ares of all the Inventors or assignees of record of the equired, see below.	entire interest or their representation for their representation is required to object their representations for reduced application form to the Usandiza Suggestions for reduced their respectives for reduced their respective for reduced	(30) (30) (30) Telep ontative(s) are required. Substitute of the burden, should be specific by the 1.11 and 1.14. This collections of the burden, should be specific this burden, should b	Date 2) 992-4931 phone Number mit multiple forms if more the e public which is to file (and) on is estimated to take 8 mil dding upon the individual call ent to the Chief information

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